Auproved by OMB 3060-0440 Expires 12/31/90

## FEE PROCESSING FORM



FCC/MELLON JUL 03 1990

**07-05-90 8190091 001** 

Please read instructions on back of this form before completing it. Section I MUST be completed. If you are applying for concurrent actions which require you to list more than one Fee Type Code, you must also complete Section II. This form must accompany all payments. Only one Fee Processing Form may be submitted per application or filing. Please type or print legibly. All required blocks must be completed or application/filing will be returned without action.

SECTION I APPLICANT NAME (Last, first, middle initial)						
Manufaci Communications Inc						
Moenkopi Communications, Inc.  MAILING ADDRESS (Line 1) (Maximum 36 characters - refer to Instruction (2) on reverse of form)						
1150 Inca Townhouse #48 MAILING ADDRESS (Line 2) (if required)	(Maximum 65 characters)	)				
(3)						
CITY						
Denver STATE OR COUNTRY (If foreign address)	ZIP CODE	CALL SIGN OR OTHER FCC IDENTIFIER (If applica	nia)			
			UI <del>O</del> /			
CQ. January Co. Too Co.	80204	KCNY				
		e applying for, Fee Type Codes may be found in FCC nter in Column (C) the result obtained from multiplying				
the value of the Fee Type Code in Column (						
(A)(E		(C)				
		DUE FOR FEE TYPE FOR FCC USE ONLY	,			
(1)	44.64	DE IN COCOMIN (A)				
M G R		00.00	1			
	• • • • • • • • • • • • • • • • • • • •	equesting concurrent actions which result in a				
require	ment to list more than one	Fee Type Code.				
(A) (E	B)	(C) FOR FCC USE ONLY				
FEE TYPE CODE FEE MUL						
		DUE FOR FEE TYPE				
(if requ		DUE FOR FEE TYPE DDE IN COLUMN (A)				
		DUE FOR FEE TYPE				
(if requ		DUE FOR FEE TYPE				
		DUE FOR FEE TYPE				
(if requ		DUE FOR FEE TYPE				
(if requ		DUE FOR FEE TYPE				
(if requ		DUE FOR FEE TYPE				
(if requ		DUE FOR FEE TYPE				
(if requ		DUE FOR FEE TYPE				
(if requ		DUE FOR FEE TYPE				
(if requ		DUE FOR FEE TYPE				
(if required (if r		DUE FOR FEE TYPE				
(if requ		DUE FOR FEE TYPE				
(if required (if r		DUE FOR FEE TYPE				
(1) (2) (3) (4) (5) ADD ALL AMOUNTS SHOWN IN COLUMN C	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	DUE FOR FEE TYPE DDE IN COLUMN (A)				
(2) (3) (4) (5) ADD ALL AMOUNTS SHOWN IN COLUMN COL	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	DUE FOR FEE TYPE DDE IN COLUMN (A)				
(1) (2) (3) (4) (5) ADD ALL AMOUNTS SHOWN IN COLUMN C	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	DUE FOR FEE TYPE DDE IN COLUMN (A)				

## INSTRUCTIONS FOR COMPLETING FEE PROCESSING FORM, FCC FORM 155, May 1990

- (1) "Applicant Name" Enter the name (last, first, middle initial) of the applicant as it appears on the original application or filing being submitted with this Fee Processing Form. If company, enter name which is used commercially.
- (2) "Mailing Address (Line 1)" Enter the street address or post office box number to which the applicant wishes correspondence sent.
- (3) "Malling Address (Line 2)" This line may be used for further identification of the address if additional space is required.
- (4) "City" Enter the name of the city associated with the given street address.
- (5) "State or Country" Enter the appropriate two-digit state abbreviation as prescribed by the U.S. Postal Service. If address is foreign, enter the appropriate country name here.
- (6) "ZIP Code" Enter the appropriate five or nine-digit ZIP code prescribed by the U.S. Postal Service.
- (7) "Call Sign or Other FCC identifier" Enter an applicable call sign or unique FCC identifier, if any, as shown on your attached application or filing. If applying for a service affecting more than one call sign, enter one call sign only.
- (8) Column (A), "Fee Type Code" Enter correct Fee Type Code(s) from the appropriate Fee Filing Guide. Only one Fee Processing Form may be submitted per application or filing. Inaccurate or erroneous Fee Type Codes may result in your application or filing being returned to you without further processing.
- (9) Column (B), "Fee Multiple" Certain applications and filings may request action with respect to more than one station, license, frequency, or party and can be submitted together with one check if they meet specific conditions. This column is used only if a multiple, i.e., two or more, is being applied for. Examples of when this would be used are renewing more than one call sign, frequency, station, or the transfer of control of more than one station. Refer to the appropriate Fee Filing Guide for additional information.
- (10) Column (C), "Fee Due For Fee Type Code in Column (A)" Enter in this block the amount of the fee associated with the fee Type Code shown in Column (A) (times (x) the fee multiple, if required).
- (11) "Total Amount Remitted With This Application or Filling" Enter the total of lines (1) through (5) of Column (C). This amount

ORIGINAL Renewal



## NEUS

News media information 202 / 632-5050 Recorded listing of releases and texts 202 / 632-0002

FEDERAL COMMUNICATIONS COMMISSION 1919 M STREET, N.W. WASHINGTON, D.C. 20554

This is an unofficial announcement of Commission action. Release of the full text of a Commission order constitutes official action. See MCI v. FCC. 515 F. 2d 385 (D.C. Circ. 1974).

33325

Report No. MM-741

MASS MEDIA ACTION

May 27, 1993

RENEWAL APPLICATION OF KCNY (AM), MOAB, UT, DESIGNATED FOR HEARING (MM DOCKET NO. 93-152)

The Commission has designated for hearing the renewal of licence application filed by Moenkopi Communications, Inc., licensee of KCNY (AM), Moab, UT, and the results of an investigation into the station's silent status.

Station KCNY (AM) is currently off the air without authority. This fact, coupled with the fact that Moenkopi has kept KCNY (AM) off the air for over three years, supports the Commission's determination that Moenkopi is in apparent violation of the Commission's rules. The Commission believes that the evidence before it is sufficient to raise a substantial and material question of fact regarding Moenkopi's capability and intent to resume the broadcast operations of KCNY (AM).

Therefore, the Commission has designated the renewal of license application for station KCNY (AM) for hearing to determine: a) whether Moenkopi has the capability and intent to expeditiously resume broadcast operations of the station consistent with FCC rules; b) whether Moenkopi has violated Commission rules; and, c) in light of the evidence adduced, whether or not grant of the renewal of license application would serve the public interest, convenience and necessity.

If it is determined that the hearing record does not warrant an order denying the renewal of license application, it shall be determined whether an Order of Forfaiture shall be issued assignt Moorkoni in an argent not to avoid

Federa Communications Commiss Washington, D.C. 2092		APPLICATION FOR NO NONCOMMERC		TV BROADCAST STATION	Approved by OMB 3060-0110 Expires 5/31/91
For <u>Commission</u> Fee Use C	Only FEE N	FEE NO: 900703 / A FEE TYPE: FEE AMT: 10 SEQ:		For Applicant Fee Use Only  Is a fee submitted with this	
				application?	X Yes No
	FEE A			If No, indicate reason therefor (check one box):  Nonfeeable application  Fee Exempt (See 47 C.F.R. Section 1.1112)	
	ID SE				
For <u>Commission</u> Use Only	: File No.			Noncommercial educati	onal licensee
1. Name of Applicant  Moenkopi Communications, Inc.  Mailing Address  1150 Inca Townhouse #48			4. Have the following reports been filed with the Commission:  (a) The Broadcast Station Annual Employment Reports (FCC Form 395-B) as required  Yes No		
City Denver	State CO	ZIP Code 80204	by 47 C.F.R. Section 73.3612?  If No, attach as Exhibit No an explanation.		
2. This application is for:	This application is for:  X AM FM TV  (a) Call Letters:  (b) Principal Community:  City Moab State UT		(b) The applicant's Ownership Report (FCC Yes No Form 323 or 323-E) as required by 47 C.F.R. Section 73.3615?		
3. Attach as Exhibit No booster or TV booster s' license is also requested.	tation for which	•	If No, give the following information:  Date last ownership report was filed  Call letters of station for which it was filed		
PD: 7.18.90	D C		-		FCC 303- May 198

	0 جنسو و ، بنندلا
	s the applicant in compliance with the provisions of Section 310 of the Communications Act of 1934, as X Yes Nomended, relating to interests of aliens and foreign governments?
ı	No, attach as Exhibit No an explanation.
2 2	since the filing of the applicant's last renewal application for this station or other major application, has an developed the d
i	Yes, attach as Exhibit No a full description of the persons and matters involved, including an dentification of the court or administrative body and the proceeding (by dates and file numbers) and the isposition of the litigation.
	Vould a Commission grant of this application come within 47 C.F.R. Section 1.1307, such that it may have a Yes X No ignificant environmental impact?
ı	Yes, attach as Exhibit No an Environmental Assessment required by 47 C.F.R. Section 1.1311.
ı	No, explain briefly why not.
8. H	as the applicant placed in its station's public inspection file at the appropriate times the documentation required X Yes No. 147 CFR. Sections 73.3526 or 73.3527?
j	No, attach as Exhibit No a complete statement of explanation.
regu auth T	ne APPLICANT hereby waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the latory power of the United States because of the previous use of the same, whether by license or otherwise, and requests an prization in accordance with this application. (See Section 304 of the Communications Act of 1934, as amended.)  Le APPLICANT acknowledges that will the statements made in this application and attached exhibits are considered material isentations and that all the exhibits are a meterial part hereof and are incorporated herein as set out in full in the application.
	FFICATION: I certify that the statements in this application are true, complete, and correct to the best of my knowledge and if, and are made in good faith.
Nan	Michael A. Youngren Skineture heliast Carrier
Title	President, Moenkopi Communications  Date  June 29, 1900

WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND IMPRISONMENT. U.S. CODE, TITLE 18, SECTION 1001.